## **DECLARATION AND POWER OF ATTORNEY** FOR PATENT APPLICATION

ATTORNEY DOCKET NO. 10013200-1

As a below named inventor, I hereby declare that:

My residence/post office address and citizenship are as stated below next to my name;

I helieve I am the original first and sole inventor (if

METHOD AND SYSTEM	FOR MAILING	AN OBJECT			
the specification of which	ch is attached he	ereto unless th	ne following box is o	checked:	
(X) was filed on HE			cation No. or PCT I		lication
Number	an	d was amende	ed on	(if applicat	ole)
I hereby state that I ha including the claims, as disclose all information v	ve reviewed and amended by ar which is material	d understood ny amendment I to patentabili	the contents of the	above-identifie	, ud angaification
Foreign Application(s) and/or ( I hereby claim foreign priority inventor(s) certificate listed be a filing date before that of the	benefits under Title	35, United State	ny toroian application for	any foreign applica patent or inventor(	tion(s) for patent o s) certificate havin
COUNTRY	APPLICAT	TION NUMBER	DATE FILED	PRIORITY CLAIMED	UNDER 35 U.S.C. 119
				YES:	NO:
Provisional Application				YES:	NO:
Provisional Application I hereby claim the benefit und				1	
below:	APPLICATION I	NUMBER	FILING DATE		
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nereby claim the benefit und insofar as the subject matter of	er Title 35, United	States Code, Sec	tion 120 of any United	States application(s	) listed below and
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Inventor's Signature Rev 10/01 (DecPwr)

Post Office Address:

(Use Page Two For Additional Inventor(s) Signature(s))

Same as residence

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